

Town of Bar Harbor Public Access Use Agreement

Name: _____

(Print)

Current Residential Address:

Bar Harbor, ME 04609

Phone: (Day) _____ **(Evening)** _____

E-mail: _____

Mailing Address (If different from above):

City: _____ **State:** _____ **Zip:** _____

I have read and understand the Rules and Regulations of the Town of Bar Harbor Public Access Policy, and agree to abide by them.

Signature: _____ **Date:** _____

Parent/Guardian Signature: _____ **Date:** _____

(if Producer/Provider is under 18 years of age)

Eligibility to Distribute Programs Via Public Access

In order to distribute programs on the public access system, the requesting entity must fulfill the following requirements:

1. Be a resident, property owner, or nonprofit group which is housed or has an active branch in Bar Harbor.
2. Submit proof of eligibility if so requested. Proof of residency must be presented to the Public Access Systems Administrator. Such proof may include a current Maine driver's license or a recent utility bill.
3. Be 18 years of age,
4. If under 18 years of age, have permission from a parent or guardian to distribute programs on the public access system.
5. Submit a completed Cablecast Agreement for each program or series of programs to be cablecast.

FOR OFFICE USE ONLY **Date Received:** _____ **INITIALS:** _____